## **DECLARATION AND POWER OF ATTORNEY** FOR PATENT APPLICATION

ATTORNEY DOCKET NO. 10012284-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first

and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:  Automated Document Stamping						
the specification of which is attached hereto unless the following box is checked:						
	( ) was filed on as US Application No. or PCT International Application					
Number	as 05 Application No. or PCT international Application and was amended on (if applicable).					
I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above. I acknowledge the duty to disclose all information which is material to patentability as defined in 37 CFR 1.56.						
Foreign Application(s) and/or Claim	m of Foreign Priority					
	and have also identified below a	ny foreign application for	any foreign application(s) for patent or r patent or inventor(s) certificate having			
COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U S C 119			
			YES NO			
			YES. NO			
Provisional Application						
I hereby claim the benefit under Title 35, United States Code Section 119(e) of any United States provisional application(s) listed below:						
	APPLICATION NUMBER	FILING DATE				
insofar as the subject matter of each of the claims of this applic manner provided by the first paragraph of Title 35, United State information as defined in Title 37, Code of Federal Regulations, S application and the national or PCT international filing date of this APPLICATION NUMBER FILING DATE		Code Section 112, I acknowledge the duty to disclose material action 1.56(a) which occurred between the filing date of the prior				
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:  Customer Number 022879  Place Customer Number Bar Code Label here						
Send Correspondence to:	NIV	Direct Telepho	one Calls To:			
HEWLETT-PACKARD COMPANY Intellectual Property Administration		Anthony J. Baca				
P.O. Box 272400 Fort Collins, Colorado 80527-2400		(208) 396-3597				
made on information and with the knowledge that imprisonment, or both, un	belief are believed to be willful false statements der Section 1001 of Title ardize the validity of the ap	true; and further the and the like so m 18 of the United St				
Residence: 106 W. Rush Ct., Eagle, Idaho 83616  Post Office Address: Same as Residence						
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Inventor's Signature		$\frac{\frac{70}{25}}{0}$				

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

ATTORNEY DOCKET NO. 10012284-1

	Full Name of # 2 joint inventor:	Leonard T. Schroath	c	itizenship: USA	
	Residence:	13324 W. Bellflower Drive, Boise, Idaho 83713			
	Post Office Address:	Same as Residence			
	From Delev	att	10 · 24	1.01	
	Inventor's Signature		Date		
	Full Name of # 3 joint inventor:	Bradley J. Anderson		Citizenship: USA	
	Residence:	5424 N. Hickory Burr, Boise, Idaho 83713			
	Post Office Address:				
	Inventor's Signature		10/	24/01	
			Date		
	) ]				
	Full Name of # 4 joint inventor:	William I. Herrmann		Citizenship: USA	
	Residence:	285 W. Rush Ct., Eagle, Idaho 83616			
	William 2	Same as Residence			
		Ruce	10/	26/01	
firm week	Inventor's Signature		Date		
	Full Name of # 5 joint inventor:	:		Citizenship:	
	Residence:				
	Post Office Address:				
ini ini					
	Inventor's Signature		Date		
į dark					
	Full Name of # 6 joint inventor	=		Citizenship:	
	Residence:				
	Post Office Address:				
	Inventor's Signature		Date		
	Full Name of # 7 joint inventor	:		Citizenship:	
	Residence:				
	Post Office Address:				
	Inventor's Signature		Date		
	Full Name of # 8 joint inventor	r:		Citizenship:	
	Residence:				
	Post Office Address:				
	Inventor's Claustica				
	Inventor's Signature		Date		